PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

[6869K-109000US

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			(Column 1)		(COIL	(Column 2)			<u> </u>	OR 7	ــــــــــــــــــــــــــــــــــــــ		
TOTALOBAMO			17-					RATE	FEE	┨`	RATE	FEE	
FOR .			NUMBER FILED		NUMB	JMBER EXTRA		BASIC FEI	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		<i>O'</i>			X\$ 9=		OR	X\$18=	•	
INDEPENDENT CLAIMS			minus 3 =		0			· X43=	·	OR	X86 =		
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	ESENT				+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column						column 2		TOTAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 12	Minus	 2	0	=		X\$ 9=		OR	X\$18=		
	Independent	· 2	Minus	 3				X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						' [+145=		OR	+290=		
								TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colum	nn 2) .	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		e .		X43=	-	OR	X86=		
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM		-						
							L	+145=		OR	+290=		
					•		A	TOTAL DDIT. FEE	<u> </u>	OR	TOTAL ADDIT, FEE		
		(Column 1)				(Column 3)						•	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOUS PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ĺ	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**				X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		•		X43=	•	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									٠			
• H	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+290=		
H	** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 20, enter "20."								·.	OR ,	TOTAL ODIT. FEE		
1	he *Highest Num	ber Previously Paid	For (Total or	o orace is Independer	ness unam nt) is the i	is, enter 3." highest number	r foun	d in the app	ropriate box	in col	umn 1.		